

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: TRANSMITTER FOR LOW VOLTAGE
DIFFERENTIAL SIGNALING

Attorney Docket Number:: 021803-4.00US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure:: 4

Total Drawing Sheets:: 5

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Turkey
Status:: Full Capacity
Given Name:: Hakan
Middle Name::
Family Name:: Oner
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2101 Sonador Commons
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95128

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Hakan
Middle Name:: Ates
Family Name:: Gurcan
Name Suffix::
City of Residence:: Los Gatos
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 135 Old Orchard Court
City of Mailing Address:: Los Gatos
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 95032

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ismail
Middle Name::
Family Name:: Okter
Name Suffix::
City of Residence:: Saratoga
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 12154 Terrence Ave.
City of Mailing Address:: Saratoga
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95070

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Assignee Information

Assignee Name:: Decicon, Inc.
Street of mailing address:: 1150 North First Street, Suite 140
City of mailing address:: San Jose
State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 95112